

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BH</i>	<i>7089</i>	<i>1/30</i>
O.I.P.E. CLASSIFIER		<i>7</i>	<i>8-5-99</i>
FORMALITY REVIEW		<i>11020</i>	<i>8/17/99</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 Allowed I Interference
 (Through numeral) ... Canceled A Appeal
 Restricted O Objected

Claim	Date				
Final	Original	10	11	12	13
1	✓	✓			
2	✓	✓			
3	✓	✓			
4	✓	✓			
5	✓	✓			
6	✓	✓			
7	✓	✓			
8	✓	✓			
9	✓	✓			
10	✓	✓			
11	✓	✓	✓		
12	✓	✓	✓		
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Claim	Date				
Final	Original	10	11	12	13
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy